



Key Points to consider for successful reimbursement
submissions to Capital Financial Group, Inc.

***** ALL RECEIPTS MUST INCLUDE THE FOLLOWING *****

- Provider Name
- Patient Name
- Date of Service
- Description of Service
- Amount Paid

**Please note that credit card receipts are not accepted.

1) Fax your claim toll free to Capital Financial Group, Inc. (855) 220-9669

*This is the best method for claims submission.

2) Use the proper claim form

*Your group name is on the top of the claim form and the address for Capital Financial Group, Inc. and the fax number are in the lower right hand corner of the claim form.

3) Print clearly when filling out the claim form

*The claim will be denied if the information is not legible.

4) Please be sure to write in the first and last name of the person the receipt corresponds with.

* The receipt will be denied if you use quotation marks or arrows instead of names.

5) Please fill out your claim form correctly and sign the bottom. (example attached)

*Capital Financial Group, Inc. can not make corrections to your claim form. We have to deny the claim and mail it back to you if the form is not filled out correctly. If you have any questions, please call for assistance.

6) Keep the original copies of all your documents.

*In some cases, you may need to resubmit the information.

7) Mail or fax copies of your receipts on regular sized paper. Do not send original receipts.

*Capital Financial Group, Inc. can not make copies of your receipts. If you mail cash register receipts, prescription drug printouts or small hand written receipts, your claim will be mailed back to you, unprocessed.

8) Always respond to any communication you may receive from Capital Financial Group, Inc.

*You may contact Capital Financial Group, Inc. directly @ (518) 793-2885

9) There is a \$10.00 minimum payment for both checks and direct deposits.

*Once your reimbursement amount reaches \$10.00, a payment will be made.

10) Please cash your reimbursement checks within 90 days or the check will be void.

*It will cost you \$10.00 to have a check reinstated

11) Contact Laurie Woodward or Annette Tucker at Capital Financial Group, Inc. @ 793-2885 if you have any questions or concerns regarding your claim. Thank you